

**COMBINED DECLARATION AND POWER OF ATTORNEY
FOR UTILITY OR DESIGN PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CROSSLINKABLE COMPOSITION FOR A BATTERY ELECTROLYTE

the specification of which (check only one item below):

- ☐ is attached hereto, and was amended on _____ (if applicable).
- ☐ was filed as United States application number _____ on _____ and was amended on _____ (if applicable).
- ☒ was filed as PCT international application number PCT/FR 2004/000709 on March 23, 2004 and was amended on October 12, 2005 (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §§119 (a)-(d), 172 or 365(a) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §§119(a)-(d), 172 or 365(a):			
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (MM/DD/YYYY)	PRIORITY CLAIMED UNDER 35 U.S.C. §§119, 172 or 365(a)
PCT	PCT/FR 2004/000709	03/23/2004	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
FRANCE	FR 03/04157	04/03/2003	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby appoint the attorneys and agent(s) associated with the following PTO Customer Number of Buchanan Ingersoll PC (including attorneys from Burns, Doane, Swecker & Mathis) to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and to transact all business in connection with international applications directed to said invention:

Customer Number **2 1 8 3 9**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR			
GIVEN NAME (first and middle (if any)) LUCILE		FAMILY NAME OR SURNAME GAMBUT-GAREL	
INVENTOR'S SIGNATURE		DATE	
RESIDENCE (City, State & Country) LYON, FRANCE		CITIZENSHIP FRENCH	
MAILING ADDRESS (Complete Street Address including City, State, Zip & Country) 16, RUE DES TUILIERS, F-69003 LYON, FRANCE			
NAME OF SECOND INVENTOR			
GIVEN NAME (first and middle (if any)) CATHERINE		FAMILY NAME OR SURNAME GEORGE	
INVENTOR'S SIGNATURE		DATE	
RESIDENCE (City, State & Country) SAINT GENIS LES OLLIERES, FRANCE		CITIZENSHIP FRENCH	
MAILING ADDRESS (Complete Street Address including City, State, Zip & Country) 2 BIS, RUE DES MOURRONS, F-69290 SAINT GENIS LES OLLIERES, FRANCE			
NAME OF THIRD INVENTOR			
GIVEN NAME (first and middle (if any)) CARROLL		FAMILY NAME OR SURNAME VERGELATI	
INVENTOR'S SIGNATURE		DATE	
RESIDENCE (City, State & Country) SAINT BAUDILLE DE LA TOUR, FRANCE		CITIZENSHIP FRENCH	
MAILING ADDRESS (Complete Street Address including City, State, Zip & Country) LIEU-DIT "VILLENEUVE", F-38118 SAINT BAUDILLE DE LA TOUR, FRANCE			

NAME OF FOURTH INVENTOR		
GIVEN NAME (first and middle (if any)) JEAN-MARC		FAMILY NAME OR SURNAME PUJOL
INVENTOR'S SIGNATURE		DATE
RESIDENCE (City, State & Country) RILLEUX, FRANCE		CITIZENSHIP FRENCH
MAILING ADDRESS (Complete Street Address including City, State, Zip & Country) 60, RUE DE GENEVE -N9, F-69140 RILLEUX, FRANCE		
NAME OF FIFTH INVENTOR		
GIVEN NAME (first and middle (if any))		FAMILY NAME OR SURNAME
INVENTOR'S SIGNATURE		DATE
RESIDENCE (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State, Zip & Country)		
NAME OF SIXTH INVENTOR		
GIVEN NAME (first and middle (if any))		FAMILY NAME OR SURNAME
INVENTOR'S SIGNATURE		DATE
RESIDENCE (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State, Zip & Country)		
NAME OF SEVENTH INVENTOR		
GIVEN NAME (first and middle (if any))		FAMILY NAME OR SURNAME
INVENTOR'S SIGNATURE		DATE
RESIDENCE (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State, Zip & Country)		